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POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	10/816,228
Filing Date	3/31/2004
First Named Inventor	Chaves et al.
Title	OPTICAL DEVICE FOR LED-BASED LAMP
Art Unit	2872
Examiner Name	
Attomey Docket Number	3084.028

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I am the: X Applicant/Inventor				
Assistance of record of	the entire interest. See 37 CF	:P ₹ 71		
Statement under 37 C	FR 3.73(b) is enclosed. (Form	n PTO/SB/96).	· · · · · · · · · · · · · · · · · · ·	
	SIGNATURE o	f Applicant or Assigned	of Record	
Name Julio Cocar Chav	RS			
Signature The Un	en luto Chown			
Date August	13 2004		Telephone	(944) 265 05 44
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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/818,228
Filing Date	3/31/2004
First Named Inventor	Chaves et al.
Title	OPTICAL DEVICE FOR LED-BASED LAMP
Art Unit	2872
Examinor Name	
Attorney Docket Number	3084.028

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/816,228
Filing Dato	3/31/2004
First Named Inventor	Chaves et al.
Title	OPTICAL DEVICE FOR LED-BASED LAMP
Art Unit	2872
Examiner Name	
Attorney Docket Number	3084.028

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/816.228
Filing Date	3/31/2004
First Named Inventor	Chaves et al.
Title	OPTICAL DEVICE FOR LED-BASED LAMP
Art Unit	2872
Examinor Name	
Attomay Docket Number	3084.028

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/816,228
Filing Date	3/31/2004
First Named Inventor	Chaves et al.
Title	OPTICAL DEVICE FOR LED-BASED LAMP
Art Unit	2872
Examiner Namo	
Attorney Docket Number	3084.028

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POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	10/B16,22B
Filing Date	3/31/2004
First Named Inventor	Chaves at al.
Title	OPTICAL DEVICE FOR LED-BASED LAMP
Art Unit	2872
Examiner Name	
Altomey Docket Number	3084,028

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NOTE: Signatures of all the inventors or sasignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
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